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Bib Data Sheet

CONFIRMATION NO. 7063

<b>SERIAL NUMBER</b> 10/618,418	<b>FILING OR 371(c) DATE</b> 07/11/2003 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b>
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/290,725 11/08/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***    **\*\* SMALL ENTITY \*\***  
 10/09/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 17	<b>INDEPENDENT CLAIMS</b> 2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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**TITLE**

System and process for matching patients with clinical medical trials

<b>FILING FEE RECEIVED</b> 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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